FEC FORM 1

## STATEMENT OF ORGANIZATION

FORM 1	UNGANI	_		
	(See instru	ictions)	Office use only	
NAME OF COMMITTEE (in f	ull) (Check if name is changed)	Example: If typying, type over the lines	12FE4M5	
SALEM COMM	UNICATIONS CORPORATION	I POLITICAL ACTION COMM	ITTEE	
ADDRESS (number and s	treet) 4880 SANTA ROS	SA ROAD		
X (Check if addre	ss IIIIII			
is changed)	CAMARILLO		CA 93012 - 111	
COMMITTEE'S E-MAII	_ ADDRESS	CITY▲	STATE▲ ZIP CODE ▲	
Sandi.walker@	salem.cc			
COMMITTEE'S WEB F	PAGE ADDRESS (URL)			
Salpac.org				
COMMITTEE'S FAX N <b>8053844522</b>	UMBER			
2. DATE 0 6	/ D D / Y Y Y Y Y Y 2007			
3. FEC IDENTIFICATION	TION NUMBER	C C00321158		
4. IS THIS STATEMENT X NEW (N) OR AMENDED (A)				
I certify that I have examin	ned this Statement and to the best of my	knowledge and belief it is true, correct	and complete	
Type or Print Name of	Treasurer Mr. Russell R	. Hauth		
Signature of Treasurer	Electronically Filed by Mr. Ru	ssell R. Hauth	Date 06 / 29 / 2007	
NOTE: Submission of fals	•	may subject the person signing this SI	atement to the penalties of 2 U.S.C. S437g.  WITHIN 10 DAYS	
Office Use Only		For further informatio Federal Election Comm Toll Free 800-424-953	ission FEC FORM 1	

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5.	TYPE OF COMMITTEE (Check One)				
	(a) This committee is a principal campaign committee. (Complete the candidate information below.)				
	(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)				
	Name of Candidate				
	Candidate Party Affiliation Office Sought: House Senate President	State District			
	(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.				
	Name of Candidate				
	(d) This committee is a (or subordinate) committee of the Rep	mocratic, ublican,etc.) Party.			
	(e) This committee is a separate segregated fund				
	(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fun committee.	d or party			
6.	Name of Any Connected Organization or Affiliated Committee				
	Mailing Address				
	CITY▲ STATE ▲ Z	IP CODE A			
	Relationship				
	Type of Connected Organization:				
	Corporation Corporation w/o Capital Stock Labor Organizatio	n			
	Membership Organization Trade Association Cooperative				
	<u> </u>				

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Write or Type Committee Name

C A	COMMUNICATIONS	CORPORATION POLITICAL	ACTION COMMITTEE
IJ₽	COMMUNICATIONS	CORPORATION POLITICAL	ACTION COMMITTEE

	Custodian of Records: Identify by name, address, (phone number optional), and position of the person in possession of Committee books and records.					
Full Name						
Mailing Address	-					
	-					
Title or Position \	,	CITY A	STATE	ZIP CODE A		
			Felephone number			
Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).						
name and addi	ess of any d	esignated agent (e.g., assistant treasurer,				
Full Name of Treasurer	·	eell R. Hauth				
Full Name	·					
Full Name of Treasurer	·	sell R. Hauth	CA	91320		
Full Name of Treasurer	Mr. Russ	sell R. Hauth 4526 Via Don Luis	CA STATE▲	91320 ZIP CODE ▲		
Full Name of Treasurer Mailing Address	Mr. Russ	Newbury Park				
Full Name of Treasurer Mailing Address	Mr. Russ	Newbury Park	STATE A			
Full Name of Treasurer  Mailing Address  Title or Position	Mr. Russ	Newbury Park	STATE A			
Full Name of Treasurer  Mailing Address  Title or Position  Full Name of Designated Agent	Mr. Russ	Newbury Park  CITY A	STATE A			

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<ol> <li>Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rent safety deposit boxes or maintains funds.</li> </ol>				
	Name of Bank, Depository, etc.			
	First Ca	alifornia Bank		
	Mailing Address	300 Esplanade Dr.		
		Suite 102		
		Oxnard CA 930	036   _	

STATE ∠

**ZIP CODE** △

CITY 🛆